

United States Of America  
Department of Transportation - Federal Aviation Administration  
**Supplemental Type Certificate**

*Number* SA1947SW

*This Certificate issued to* AAR Aircraft Services, Inc.  
DBA: AAR Aircraft Services-Oklahoma  
6611 South Meridian  
Oklahoma City, OK 73159-1104

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 4b of the Civil Air Regulations.*

*Original Product Type Certificate Number :* A2SW  
*Make :* Israel Aircraft Industries  
*Model :* 1121, 1121A, 1121B

*Description of Type Design Change:*

Installation of a fuel drain collector in accordance with Air Center Drawings 551028 dated 11/21/74 and 551029 dated 11/25/74, or later FAA approved revisions.

*Limitations and Conditions:*

FAA Approved Airplane Flight Manual Supplement dated January 17, 1975, is required.

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application :* December 30, 1974

*Date reissued :* March 5, 1999

*Date of issuance :* January 22, 1975

*Date amended :* October 25, 1985



*By direction of the Administrator*

*S. Frances Cox*  
(Signature)  
S. Frances Cox, Manager  
Special Certification Office,  
Southwest Region

(Title)

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

---

---

### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to *(Name of transferee)* \_\_\_\_\_

*(Address of transferee)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

from *(Name of grantor) (Print or type)* \_\_\_\_\_

*(Address of grantor)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor *(In ink)*: \_\_\_\_\_